



**GIFT CARD DATABASE  
New Division Setup for Existing Merchant**

(For use only when adding additional divisions to companies for which the enrollment form and contract have already been processed)

Email Attn: PTI – Giftcard Operations

**Attention keyer: Please respond to sender with status within 24 hours of receiving this request.**

Division Number: \_\_\_\_\_  
Contact Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
Address 2: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Fax: \_\_\_\_\_  
Email: \_\_\_\_\_  
Corporation Name: \_\_\_\_\_  
Chain/Franchise Name: \_\_\_\_\_

**For requests for more than one merchant, a spreadsheet may be attached with the above information for each location.**

**Special Comments:** \_\_\_\_\_